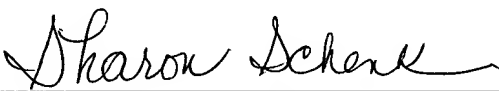




03-15-04

AF
3763

CERTIFICATE OF MAILING BY "EXPRESS MAIL" (37 CFR 1.10)			Matter No.
Applicant(s): Bernard Ackerman			409897
Serial No.	Filing Date	Examiner	Group Art Unit
09/449,096	November 24, 1999	Catherine Serke	3763
Invention SINGLE LUMEN BALLOON CATHETER			
I hereby certify that this Transmittal Form (1 page); Response to Final Office Action Mailed January 12, 2004 (9 pages); and return post card are being mailed in an envelope addressed to: Mail Stop AF, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this 12th day of March, 2004.			
<div>Sharon Schenk Name of Depositor</div>			
<div> Signature of Depositor</div>			
<div>EV210655272US Express Mail Label No.</div>			

RECEIVED
MAR 18 2004
TECHNOLOGY CENTER R3700



Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/449,096
	Filing Date	November 24, 1999
	First Named Inventor	Bernard Ackerman
	Art Unit	3763
	Examiner Name	Catherine Serke
Total Number of Pages in This Submission	Attorney Docket Number	409897

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Certificate of Mailing & Return Post Card
Remarks		RECEIVED MAR 18 2004 TECHNOLOGY CENTER/R3700

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Janelle D. Strode LATHROP & GAGE LC
Signature	
Date	March 12, 2004

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being transmitted to the USPTO by depositing with the United States Postal Service with sufficient postage as express mail (Label No.: EV210655272US) in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.			
Typed or printed name	Sharon Schenk		
Signature		Date	March 12, 2004

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.